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- a. ☐ A check in the amount of \$ \_\_\_\_\_ to cover the above fees is enclosed.
- b. ☒ Please charge my Deposit Account No. 502621 in the amount of \$ 525.00 to cover the above fees.  
A duplicate copy of this sheet is enclosed.
- c. ☒ The Commissioner is hereby authorized to charge any additional fees which may be required, or credit any overpayment to Deposit Account No. 502621. A duplicate copy of this sheet is enclosed.
- d. ☐ Fees are to be charged to a credit card. WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

NOTE: Where an appropriate time limit under 37 CFR 1.495 has not been met, a petition to revive (37 CFR 1.137(a) or (b)) must be filed and granted to restore the International Application to pending status.

SEND ALL CORRESPONDENCE TO:

John MOETTELI  
MOETTELI & ASSOCIATES SARL  
St. Leonhardstrasse 4  
CH-9000 St. Gallen  
SWITZERLAND

e-mail: moetteli@patentinfo.net

Customer No. 51184

SIGNATURE

John MOETTELI

NAME

35,289

REGISTRATION NUMBER

Adjustment date: 01/08/2007 CBURT1  
12/06/2006 SBASHEIR 00000001 502621 10595442  
04 FC:2615 150.00 CR

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01 FC:2615 75.00 DA

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01 FC:2631 150.00 DA  
02 FC:2633 100.00 DA  
03 FC:2642 200.00 DA  
04 FC:2615 150.00 DA

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03 FC:2642 200.00 CR

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